

Work Order for Master Case M2010-1574

[\[back\]](#)****Assign To** Rabourn, Jaclyn M, DOH****Priority** 1 - Urgent****Start Date** **Follow-Up Date** **Due Date** 11/26/2013 ****Request Type** Credential Status Change****Description**

RE: JOAN CAROL GOLSTON, SWI.LW.00004224. Please change the credential status to Active per the STID release effective 11/22/13. Thank you, dianna staley

Items with ** are required.

Case Disposition Worksheet

Respondent: Joan GolstonDate Presented: 11/14/2013

Profession: _____

Case Number: MC2010-1574Presented by: Tammy Kelley

Staff Attorney: _____

Pre-Assigned or Requested (circle one)¹
 Staff Present: ☒ Tammy Kelley ☒ Bill
 Kellington ☒ Betty Moe ☒ Don Painter
☐ Leann Yount ☐ Billie Dale ☐ Janette
 Benham
SEXUAL MISCONDUCT CASES

For Board and Commission cases, panel should refer sexual misconduct cases to the Secretary when there are no clinical issues involved. (It is recommended to make this referral only after investigation; however, any pre-investigation referral should include a panel authorization for investigation.)

- ☐ Panel finds there are clinical issues, do not refer.
☐ No clinical issues, refer case to Secretary

Complete Signature Below Only If Case Is Referred to Secretary

Authorized by Panel Chair: _____

Print Name of Panel Chair: _____

per Program Staff (Initials) _____

Reviewing Commission Member _____

(if applicable)

(if applicable)

Date referral authorized: _____

A. REQUEST FOR LEGAL ACTION:

1 - Attorney Work Product - RCW 42.56.290 - Drafts, notes, memoranda, statements, records or research reflecting the opinions or mental impressions of an attorney or attorney's agent

B. FILE CLOSED:

<input type="checkbox"/> No Jurisdiction	<input type="checkbox"/> No violation at the time the event occurred	<input type="checkbox"/> Conduct was within standard of practice	<input type="checkbox"/> No violation determined
<input type="checkbox"/> Evidence does not support a violation	<input type="checkbox"/> Risk minimal, not likely to reoccur	<input type="checkbox"/> Mistaken identity	<input type="checkbox"/> Care rendered was within standard of care
<input type="checkbox"/> Insufficient evidence	<input type="checkbox"/> Complainant withdrew	<input type="checkbox"/> No Whistleblower	<input type="checkbox"/> Complaint unique closure
<input type="checkbox"/> Application Investigation Only- No Action to Deny			

Further explanation (if any): _____

C.

1 - Attorney Work Product - RCW 42.56.290 - Drafts, notes, memoranda, statements, records or research reflecting the opinions or mental impressions of an attorney or attorney's agent

CMT CHECK LIST

RESPONDENT NAME: Joan Golston

PROFESSION: LICSW

MASTER NUMBER: M2010-1574

SEEKING APPROVAL FOR:

☐ SOC NON-COMPLIANCE

☐ FAST TRACK

☐ REINSTATEMENT

☒ RELEASE

☐ FORWARD TO COLLECTION

☐ MODIFICATION

☐ APPROVAL FOR COURSE WORK

☐ APPROVAL FOR SUPERVISOR

☐ SOA TO SOC APPROVAL

☐ SOC to SOA

☐ OTHER:

Request for Release from STID

-- Initial STID effective 2012

Requirements:

-\$1,000 Cost Recovery Fee
PAID IN FULL

-12 hours CE, in Law and Ethics
COMPLETED

☒ WORKSHEET RECEIVED FROM CASE MANAGER?

NOTES:

☒ ILRS UPDATED TO REFLECT "ACTION ITEM"

DATE _____ APPROVED ☒ DENIED _____

☐ CURRENT ILRS CREDENTIAL AND MASTER SCREEN PRINTED
AND PLACED IN FILE

COMPLIANCE OFFICER INITIAL JM DATE 11/22/13

STAFF ATTORNEY / PARALEGAL INITIAL _____ DATE _____



COMPLIANCE REQUIREMENT SUMMARY WORKSHEET

Respondent: Joan Carol Golston	Credential #: SWI.LW.00004224
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Date of Service or ACO Stamp-on NOD/APUC	7/23/12 Rec'd in Compliance 7/25/12	Master Case #	M2010-1574
Type of Action:	STID	Type of Compliance: (Probation, Suspension, Terms & Conditions etc.)	T & C
Duration:	2 years 7/23/14		

Order #	Requirement	Due	Completed
3.1	<p>Respondent shall reimburse costs to the Program in the amount of one thousand dollars (\$1,000.00), which must be received by the Program within two (2) years of the effective date of this Stipulation.</p> <p>The reimbursement shall be paid by certified or cashier's check or money order, made payable to the Department of Health and mailed to the Department of Health, Licensed Social Worker Program at PO Box 1099, Olympia, WA 98507-1099.</p> <p>Credit or Debit cards can also be used for payment at the front counter of the Department of Health building at 111 Israel Road SE, Tumwater, WA 98501, during regular business hours.</p>	7/23/14	8/7/13
3.2	<p><u>In addition to mandatory continuing education</u>, within one (1) year of the effective date of this Stipulation, Respondent shall complete twelve (12) hours of continuing education, pre-approved by the Program or its designee, as follows:</p> <p>Twelve (12) hours of continuing education in the area of Record Maintenance and Record Requests.</p> <p>Respondent shall provide the Compliance Unit with proof of completion of such course-work within thirty (30) days of such completion.</p> <p>Failure to complete the required minimum hours of pre-approved continuing education in the specified areas within the specified time(s) shall constitute a violation of this Stipulation.</p>	<p>7/23/13 pre approved 9-7-12 Completed 9-7-12 "The art of writing mH Notes to protect the clinician" Rec'd 9-20-12</p> <hr/> <p>6 additional pre approved CE's due</p> <hr/> <p>10-15-12 pre-approved</p>	<p>9/24/12</p> <p>12/19/12 Completed</p>

HIPAA + Med Law
by: Pro. Mg- Moe

CONTINUING EDUCATION: Respondent shall complete twelve (12) hours of continuing education, pre-approved by the Program or its designee, as follows:

Twelve (12) hours of continuing education in the area of Record Maintenance and Record Requests.

Course Title	Date Pre-Approved by RCM/RBM or Program	Dates attended	Proof Rcvd	Hours Awarded
The Art of Writing Letters to the District Attorney	Yes	9/7/12	9/20/12	6
HIPAA & Medical Records Law	Yes	11/16/12	12/19/12	6

Joan Carol Golston
M2010-1574

Chabot, Kimberly A (DOH)

From: Moe, Betty (DOH)
Sent: Monday, October 15, 2012 11:31 AM
To: Chabot, Kimberly A (DOH)
Subject: RE: SW Joan Golston is proposing another CE for review

Approved.

From: Chabot, Kimberly A (DOH)
Sent: Monday, October 15, 2012 10:55 AM
To: Moe, Betty (DOH)
Subject: SW Joan Golston is proposing another CE for review

Hi Betty,
Ms. Golston's request is below. You recently approved courses for SW Golston on 9/6/12.
Thanks.
Kimberly

From: jgolston@gmail.com [<mailto:jgolston@gmail.com>] **On Behalf Of** Joan Golston
Sent: Saturday, October 13, 2012 4:11 AM
To: Chabot, Kimberly A (DOH)
Subject: Continuing education opportunity

Dear Ms. Chabot,

It turns out to be harder than one might expect to find useful continuing education workshops that are primarily focused on records-related issues. I also didn't want to duplicate the material in the workshop I completed last month. However, I think I've located something interesting and potentially useful. It appears to emphasize HIPAA, with material on an area I know nothing about - electronic records, and it offers a number of practical forms and a reference manual, apparently adapted to Washington state's requirements.

Below you will find the course description and a link to the related website and workshop page. I do not need to send in my registration until early in November, so at your convenience, could kindly you review this and see if it meets your expectations?

Thank you as always for your assistance.

Warm regards,
Joan

HIPAA and Medical Records Law: Meeting the Privacy and Security Regulations, by Joe Borich
Renton, WA 11/16/2012, 8:00AM - 3:30PM

HIPAA Compliance

Now that the HIPAA compliance deadline has passed, health care providers have been struggling to comply with the unique challenges this regulation brings. Forms and privacy notifications have become the norm in the health care industry. But is your practice covering all of its bases and ensuring that your patients' information is protected? Do you know how to properly handle requests for medical records? Are you aware of the penalties that could result if reasonable safeguards are not taken? Do you know how to deal with sensitive records regarding information on minors, AIDS and mental health? Are your electronic billing practices secured?

Attend this one-day seminar and receive the answers to all these questions and more. Attendees will discuss the three major components to HIPAA compliance: privacy, security and electronic transactions. You will be given a step-by-step guide to guarantee that your practice or facility is fully secure. Information pertaining to writing the required policies, procedures and consents will be discussed, as well as samples of all required forms. Attendees will leave this seminar armed with all the information needed to comply with the HIPAA regulations.

- Receive a compliance checklist, procedural forms and training certificate
- Discuss the most current HIPAA requirements and penalties
- Review the HIPAA electronic transaction and code sets rule
- Identify the challenges and exceptions to confidentiality when dealing with records regarding AIDS, mental health, abortion and minors
- Determine the best course of action when state and federal laws contradict one another
- Explain the most common mistakes made when using electronic billing
- Assess how you can simplify the process and take cost-effective security measures
- Outline Medicare and Medicaid fraud implications
- Examine mandatory medical records and billing—It is on the horizon! Be prepared.
- Discuss regulations regarding the three biggest issues in HIPAA: privacy, patient records access and record retention

You Will Receive:

- Reference manual
- Copy of regulations (privacy and security)
- Audit HIPAA checklist
- Your state law handout
- Valid HIPAA authorization
- Valid business associate contract
- Valid privacy notice (in English and Spanish)
- HIPAA policy and procedural forms
- Government security matrix grid
- Certificate of training

JOE BORICH, III, JD, LLM, has served as a certified mediator, author, and a practicing attorney for over 30 years. He currently has his own firm in Kansas City, Kansas, where he provides legal, consulting, and business coaching services for the health care industry. Throughout his legal career, Mr. Borich has worked extensively in the area of medical records and personal privacy and has considerable litigation experience in health care related cases, including serving as the defense attorney in the nation's largest Medicare anti-kickback prosecution.

He has also worked for the Department of Justice and served as an Assistant Attorney General stationed in New York and Washington, D.C. Mr. Borich is an accomplished speaker, having given seminars for Cross Country Education for nearly a decade. He uses his experience, anecdotes, and first-hand knowledge to deliver a complete learning experience while always providing audiences with valuable, up-to-date information about state and federal law.

<https://www.crosscountryeducation.com/cce/product/showLiveSeminarDetails.do?expressCode=260976&productType=S&seminarCode=SEAT111612>

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Joan C. Golston, DCSW, LICSW
Director & Fellow, International Society for the Study of Trauma &
Dissociation
Chair, Ethics, NASW-WA chapter

1404 E. Yesler Way, Ste. 201
Seattle, WA 98122
T:(206) 328 1366; F:(206) 328 8150
jgolston@oz.net

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Any opinions expressed in this message are mine alone, and do not represent ISSTD or NASW policy.

Chabot, Kimberly A (DOH)

From: Moe, Betty (DOH)
Sent: Thursday, September 06, 2012 8:46 AM
To: Chabot, Kimberly A (DOH)
Subject: RE: Joan Golston: SW: Request re continuing education requirement

Approved.

Betty

From: Chabot, Kimberly A (DOH)
Sent: Wednesday, September 05, 2012 12:38 PM
To: Moe, Betty (DOH)
Subject: Joan Golston: SW: Request re continuing education requirement

Dear Betty,
The R provided the following CE for review. I have attached her compliance summary.
Sincerely,
Kimberly

From: jgolston@gmail.com [<mailto:jgolston@gmail.com>] **On Behalf Of** Joan Golston
Sent: Tuesday, September 04, 2012 10:40 PM
To: Chabot, Kimberly A (DOH)
Subject: Request re continuing education requirement

Re: Master case #M2010-1574
SWI.LW.00004224

Dear Ms. Chabot,

Thank you for sending me the information I'll need to satisfy the terms of my agreement with the Department. I anticipate meeting the requirements rather promptly, in part so I can be sure I'm current in my understanding of the standards with regard to records.

I have become aware of a workshop sponsored by the Washington State Chapter of the National Association of Social Workers that seems pertinent to the subject at hand. The description is at <http://www.nasw-wa.org/displaycommon.cfm?an=1&subarticlenbr=5>, and I have pasted it below as well. I am not so much interested in the defensive nature of note-taking but in what Dr. Grosso has to teach about the standard for the content and amount of detail in records, and for disclosing them.

I realize that this is short notice since the workshop is this coming Friday, and so if that isn't enough advanced notice, I will go ahead and enroll in the workshop for my own edification and wait for another opportunity that I can identify in sufficient time for you.

Here is the description:

The Art of Writing Mental Health Notes to Protect the Clinician

Presenter: Federico Grosso, PhD, MFT, BCFE

Course Description: This course addresses the standard of care for keeping mental health records for LCSWs and other master level clinicians. This standard includes the content of mental health records, the types of forms essential in public or private practice, using these forms effectively to support the clinician's professional duty, and writing succinct progress notes. Should third parties, which may include opposing attorneys find it necessary to read the clinicians records, having appropriate mental health records can diminish any potential exposure that can lead to unnecessary clinical and/or legal challenges.

Course Outline

- A. Unpredictable Clinical Danger**
- B. The Problem With Inappropriate Clinical Records**
- C. Resolving the Clinical Danger With Appropriate Clinical Records**
- D. The Continuous Protection of the Clinician Using Appropriate Mental Health Records**

Learning Objectives

- 1. Using large and small group activities, visual elements, discussion and participatory practical exercises, participants will learn the differences between inappropriate versus appropriate clinical documentation.**
- 2. Using the same format as in number 1, participants will learn to use the appropriate structure to protect themselves from unpredictable clinical challenges that may lead to legal actions.**
- 3. Participants will use small and large group activities to practice the documentation assessment, diagnostic, and treatment protocols. In these groups, participants will learn to integrate these protocols into a repeatable structure to write records that will serve to protect them throughout their professional experience.**

About the Presenter:

Federico Grosso, PhD, MFT, BCFE, is a licensed marriage and family therapist in forensic private forensic practice in Santa Barbara, California. He is an author, academician, consultant, expert witness, and lecturer in the area of legal and ethical guidelines for marriage and family therapists, clinical social workers, licensed professional counselors and drug and alcohol counselors. He serves as a successful and effective expert witness in malpractice and administrative actions in this field and provides consultation to attorneys on the strengths and weaknesses of their malpractices. Dr. Grosso limits his practice to consulting with attorneys and serving as an expert witness in legal actions involving LCSWs and MFTs. Attorneys recognize and appreciate his ability as an expert witness. This experience is translated into practical and effective course content allowing clinicians to create clinical safety by recognizing that "reasonable and prudent" care offers greater freedom and versatility than being "right" or "perfect" in the delivery of psychotherapy.

Dr. Grosso is currently an official lecturer for the California Chapter of the National Association of Social Workers. In addition to serving as an expert witness in California, he consults on malpractice cases and lecture throughout the United States. His publications are widely used in psychotherapy academic programs and by attorneys who specialize in mental health malpractice. He has addressed the standard of care for Mental Health Records and Mental Health Treatment

Thank you for considering this request.

Sincerely,

Joan

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Joan C. Golston, DCSW, LICSW
Director & Fellow, International Society for the Study of Trauma &
Dissociation
Chair, Ethics, NASW-WA chapter

1404 E. Yesler Way, Ste. 201
Seattle, WA 98122
T:(206) 328 1366; F:(206) 328 8150
jgolston@oz.net

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Any opinions expressed in this message are mine alone, and do not represent ISSTD or NASW policy.

Compliance File Checklist

Respondent Name:

Joan Carol Golston LW

Compliance Intake:

Ktm

Date file to CO

7-26-12

☒ Order / STID received from Legal and date stamped.

☒ Work Order for credential status change needed?

☒ Labels on Compliance File

☒ In master case complete "forward to Compliance Intake" with date Order was stamped in Compliance

☒ In master case create action item "forward for compliance monitoring"

☒ Verify or Enter RBM/ RCM in ILRS under comments (get name from Case, or under participants if needed)

☒ In Master Case create Action Item: Assign RBM/ RCM (get name from Case, participants or comments)

☒ If "R" has counsel, add to ILRS under comments (if not under other participants).

☒ If Respondent has more than one credential, notify all CEO's involved

☒ Create Compliance Requirement Summary Worksheet

☒ Create Initial Acknowledgement Letter to Respondent

☒ Revenue slips if disciplinary fine or cost recovery owed

☒ CE UA, Self Declaration, AA-NA Reporting forms

☒ Employer / Supervisor / Consultant / Treatment Provider OR Declaration of Unemployment Reporting forms

☒ Left Side/file-bottom up: Summary Worksheet; Telephone Log; Contact View Screen; Credential View Screen; Compliance File Checklist; Credential Status Work Orders

☒ Right Side/file-bottom up: Order/STID/Agreement w/ cover ltr & Declaration of Service: Acknowledgement ltr

☒ Send email attachment of Order/STID and effective date to: WHPS (Gilda Dumlaio, cc: CO, Beth Dotson, & Nicole Vreeland), WPHP salberti@wphp.org or WRAPP williamrhodes2003@msn.com Date sent: _____

☒ Email the Link to Provider Credential Search (cc: CO) to: CHIRO Form: <https://www.fclb.org>
DENTAL: rkapp@dentalboards.org NA's: Suzanne.plaja@dshs.wa.gov - Reinstatements ONLY; OSTEO: dreyna@fsmb.org OSTEO PA's: njohnson@aapa.org; PHARMACY: clearinghouse@nabp.net- PODI: fpmb@fpmb.org PSYCHOLOGY: jippin@asppb.org; PT's & PTA's aburnham@fsbpt.org RAD TECHs: barbara.kummer@arrt.org; VETs Form: <https://www.aavsb.org/LicenseUpdate/> Date sent: _____

☒ If above organization notified, add to "Forward for Compliance Monitoring"

Compliance Officers:

☒ Create Action Items in ILRS (If R needs AI for WRAPP/WPHP/WHPS, add date Order sent (above))

☒ Print Master Case View Screen (put on left side of file on top of Cred. View Screen print out)

☒ Enter information onto compliance excel spreadsheet

☒ Ensure work order for credential status change is completed within 48 hours.

Master Case View Screen [update]



Master Case	M2010-1574 (PUBLIC)	Receiving Board	SECRETARY	Audit
Status	Compliance Monitoring	Receiving Profession	Social Worker Independent	Entry Items
Date Received	12/13/2010	Receiving Department	Clinical License	Documents
		Received By	Legal Secretary	Notes
		Found Issues	Legal Intake	HIPDB Report
		Violation of Federal or State Statutes, Regulations or Rules		Timeline History
		Case Nature		Laserfiche
		Violation of regulations or rules		

Comments:

- Action Items
- Resolution
- Attached Case
- Participants
- Priority History
- HIPDB Reports
- TimeTracker

Action Items [add] [add group]

Type	Assigned To	Activity	Track Time	Due	Effective	Completed	Order Signed	Created ▼	U
Compliance CE Required	Compliance, Chabot, Kimberly A		[add]	07/23/2013	07/23/2012			07/27/2012	Ch Kir A
Target: JOAN CAROL GOLSTON, SWI.LW.00004224									
Comments: 3.2: 12 hr of CE with proof of completion due in 1 yr from eff. date in area of Record Maintenance & Record Requests.									
Compliance Cost Recovery	Compliance, Chabot, Kimberly A		[add]	07/23/2014	07/23/2012			07/27/2012	Ch Kir A
Target: JOAN CAROL GOLSTON, SWI.LW.00004224									
Comments: 3.1 Cost Recovery of \$1000 due within 2 yrs of effective date of agreement.									
Forward for Compliance Monitoring	Compliance, Chabot, Kimberly A		[add]		07/26/2012	07/26/2012		07/26/2012	Me Ka
Target: JOAN CAROL GOLSTON, SWI.LW.00004224									
Correspondence: Letter: Compliance - Acknowledgement.rtf (Preview Letter)									
Envelope: envelope.rtf									
Case Status: Status Changed To: Compliance Monitoring									
Forward to Compliance Intake	Compliance, Chabot, Kimberly A				07/25/2012	07/25/2012		07/25/2012	Me Ka
Target: JOAN CAROL GOLSTON, SWI.LW.00004224									
Comments: FD rec'd from ACO Copy to CO and Cara for closure									
Closed - STID Served Compliance Conditions	Clerks Unit, Moniz, Nina M		[add]		07/23/2012	07/23/2012	07/23/2012	07/23/2012	Mc Nir
Target: JOAN CAROL GOLSTON, SWI.LW.00004224									
Warning: Warning Type: ENFORCEMENT ACTION									
Warning Effective Date: 07/23/2012									
Suppress License Print: NO									
Case Status: Status Changed To: STID Compliance									
Violations: Violation of any state or federal statute or administrative rule regulating. 18.130.180 (7)									
Serve - STID	Clerks Unit, Moniz, Nina M		[add]		07/23/2012	07/23/2012	07/23/2012	07/23/2012	Mc Nir
Target: JOAN CAROL GOLSTON, SWI.LW.00004224									
HLJ - Review and Sign STID	Health Law Judge, Defreyn, Debra L		[Charge Back]		07/19/2012	07/23/2012		07/19/2012	Jol Be
Target: JOAN CAROL GOLSTON, SWI.LW.00004224									
Comments: Signed SOA/STID to HLJ for review and signature file to ACO shelf									
STID Settlement Process	Staff Attorney, Staiger, Janet		[add]		07/18/2012	07/18/2012		07/18/2012	Ed Me T
Target: JOAN CAROL GOLSTON, SWI.LW.00004224									
Case Status: Status Changed To: STID Settlement									

Action Info: Add Due Date		11/19/2012				
Comments: Signed STID rec'd w/ file to SA for signature						
File Location	Paralegal, Banning, Gail L	[add]	07/11/2012	07/11/2012	07/11/2012	Ba Ga
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Comments: File to HD shelf.glb						
Change Master	Staff Attorney, Staiger, Janet	[add]	07/10/2012	07/10/2012	07/10/2012	Ba Ga
Case Owner						
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
SOA	Paralegal, Banning, Gail L	[add]	07/24/2012	07/10/2012	07/18/2012	Ed Me T
Served/Awaiting Response						
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Correspondence: Letter: SOA Cover Ltr.rtf (Preview Letter)						
Envelope: envelope.rtf						
Case Status: Status Changed To: SOA Served/Awaiting Response						
Action Info: Verify Case Status is Closed - Refer to Master Yes Case						
Comments: SOA served; file to GLB. cmnb						
Management	Case Management, Teachman, Janelle	[add]	07/05/2012	07/10/2012	07/05/2012	Bo Ch
Review of Draft Documents						
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Comments: File w/NOD to CM for HSC sig. cmnb						
Document	Legal Secretary, Bowman, Charlene	[add]	07/03/2012	07/05/2012	07/03/2012	Bo Ch
Formatting						
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Comments: SOA2 & STID2 in legal out for reformatting, then mail out to OC to review/sign and return by no later than July 16th. jis						
Settlement	Staff Attorney, Staiger, Janet	[Charge Back]	07/03/2012	07/03/2012	07/03/2012	Stu Jai
Activities						
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Comments: Rtn TC to OC. Discussion w/ OC. Email to Discipline Manager. Finalized proposed SOA/STId. Awaiting email confirmation from OC before formatting, mail out of docs to OC/R. jis						
Settlement	Staff Attorney, Staiger, Janet	[Charge Back]	06/22/2012	06/22/2012	06/22/2012	Stu Jai
Activities						
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Telephone	Staff Attorney, Staiger, Janet	[Charge Back]	06/21/2012	06/21/2012	06/21/2012	Stu Jai
Contact						
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Comments: TC to OC to discuss STID settlement. Not in. Left message that I will redo SOA/STID per terms agreed to at settlement conference and send to him for review. jis						
File Location	Staff Attorney, Staiger, Janet	[add]	06/19/2012	06/19/2012	06/19/2012	Stu Jai
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Comments: File to HD shelf. jis						
Settlement	Staff Attorney, Staiger, Janet	[Charge Back]	06/19/2012	06/19/2012	06/19/2012	Stu Jai
Activities						
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Comments: Settlement prep and settlement conference. jis						
Settlement	Staff Attorney, Staiger, Janet	[Charge Back]	06/18/2012	06/18/2012	06/19/2012	Stu Jai
Activities						
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Comments: Review R, OC settlement documents prep for settlement conference 6/19. jis						
Settlement	Staff Attorney, Staiger, Janet	[Charge Back]	06/15/2012	06/15/2012	06/15/2012	Stu Jai
Activities						
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Settlement	Staff Attorney, Staiger, Janet	[Charge Back]	05/22/2012	05/22/2012	05/31/2012	Stu Jai
Activities						
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Settlement	Staff Attorney, Staiger, Janet	[Charge Back]	05/31/2012	05/31/2012	05/31/2012	Stu Jai
Activities						
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Comments: Confirmed room and date/time for settlement conference: 6/19 @ 1:30pm. Room 139 TC2. Call to OC to confirm and give directions to new location. Discussed supplemental documentation that OC will provide prior to meeting. jis						
Settlement	Staff Attorney,	[Charge	05/25/2012	05/25/2012	05/25/2012	Stu

Activities	Target: Staiger, Janet [Back]					Jai
Settlement	Target: JOAN CAROL GOLSTON, SWI.LW.00004224					
Activities	Staff Attorney, [Charge Back]	05/22/2012	05/24/2012		05/24/2012	Stu Jai
	Target: JOAN CAROL GOLSTON, SWI.LW.00004224					
	Comments: Draft STID word doc emailed to OC. Phone discussions w/ OC. Setting up settlement conference meeting. jis					
Memo to File	Legal Secretary, [add]	04/26/2012	04/28/2012		04/26/2012	Ha A
	Target: JOAN CAROL GOLSTON, SWI.LW.00004224					
	Comments: docs requested by OC sent to OC. sah					
STID	Paralegal, Banning, [add]	07/08/2012	04/17/2012	07/10/2012		04/23/2012 Ba Ga
Settlement Process	Gail L					
	Target: JOAN CAROL GOLSTON, SWI.LW.00004224					
	Case Status: Status Changed To: STID Settlement					
	Action Info: Add Due Date 08/07/2012					
Settlement	Staff Attorney, [Charge Back]	04/20/2012	04/20/2012		04/20/2012	Stu Jai
Activities	Target: JOAN CAROL GOLSTON, SWI.LW.00004224					
	Comments: Discussion w/ OC requesting additional time to review and prepare settlement counter. OC anticipates that we will need to do a "sit down" settlement conference and requests something for the week of June 11th. OC will send an email confirming discussion. jis					
File Location	Legal Secretary, [add]	04/19/2012	04/19/2012		04/19/2012	Ed Me T
	Target: JOAN CAROL GOLSTON, SWI.LW.00004224					
	Comments: Files and copies to Sue					
File to Copy	Legal Secretary, [add]	04/17/2012	04/19/2012		04/17/2012	Ed Me T
Center	Edwards, Meagan T					
	Target: JOAN CAROL GOLSTON, SWI.LW.00004224					
	Comments: Files to copy center					
File Location	Legal Secretary, [add]	04/17/2012	04/17/2012		04/17/2012	Ed Me T
	Target: JOAN CAROL GOLSTON, SWI.LW.00004224					
	Comments: File to Legal Intake for processing to Copy Center. sah					
File Location	Staff Attorney, [add]	04/17/2012	04/17/2012		04/17/2012	Stu Jai
	Target: JOAN CAROL GOLSTON, SWI.LW.00004224					
	Comments: File to legal sec to copy, mail out investigative file to OC. NOTE to secretary: Do not copy contents of legal file. Please see legal file for OC's current address. Remove any complainant personal information (address, phone no., etc) jis					
STID	Staff Attorney, [add]	04/17/2012	04/17/2012		04/17/2012	Stu Jai
Settlement Process	Staiger, Janet					
	Target: JOAN CAROL GOLSTON, SWI.LW.00004224					
	Case Status: Status Changed To: STID Settlement					
	Action Info: Add Due Date 05/23/2012					
	Comments: Per OC request for settlement discussions, agreed to extend deadline out 30n days.					
Settlement	Staff Attorney, [Charge Back]	04/17/2012	04/17/2012		04/17/2012	Stu Jai
Activities	Target: JOAN CAROL GOLSTON, SWI.LW.00004224					
	Comments: Retd tc from OC Anderson. Discussion about case and response. OC requests copy of investigative file and needs 30 day extension to respond. Per OC, he will probably ask for an in person settlement conference. Email to OC confirming phone call and grant of 30 day extension, sending out investigative file.jis					
Memo to File	Legal Secretary, [add]	04/13/2012	04/13/2012		04/13/2012	Mi Be
	Target: JOAN CAROL GOLSTON, SWI.LW.00004224					
	Comments: Rec'd returned STID as Attempted Not Known from 726 Broadway STE 303 Seattle WA 98122; to LS2 inbox.					
Change Master	Staff Attorney, [add]	04/09/2012	04/09/2012		04/09/2012	Ba Ga
Case Owner	Staiger, Janet					
	Target: JOAN CAROL GOLSTON, SWI.LW.00004224					
SOA	Paralegal, Banning, [add]	04/23/2012	04/09/2012	04/17/2012		04/09/2012 Ba Ga
Served/Awaiting Response	Gail L					
	Target: JOAN CAROL GOLSTON, SWI.LW.00004224					
	Correspondence: Letter: SOA Cover Ltr.rtf (Preview Letter)					
	Envelope: envelope.rtf					
	Case Status: Status Changed To: SOA Served/Awaiting Response					
	Action Info: Verify Case Status is Yes					
	Closed - Refer to Master					

Case						
Comments: SOA/STID sent; due 4/23; file to HD shelf sah						
Telephone Contact	Staff Attorney, Staiger, Janet	[add]	04/05/2012	04/05/2012	04/05/2012	St Jai
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Comments: VM from Dr. Crei from women's prison. Per prison records, R did not submit any documentation until 10/2010 and it was not the entire file, just psychological assessment. jis						
Management Review of Draft Documents	Case Management, Kelley, Tammy	[add]	04/04/2012	04/06/2012	04/04/2012	Ke Ta
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Comments: File and docs to CM for review and signature. sah						
Signed docs and file returned for service TLK						
Telephone Contact	Staff Attorney, Staiger, Janet	[Charge Back]	04/03/2012	04/03/2012	04/03/2012	St Jai
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Comments: TC to Dr. T. Rain Carei for date that prison received client records from R. Prison file is archived now but she will obtain that date, might take a few weeks. Per Dr., delay in receipt of records caused delay in treatment of client, client harm. Dr. can provide supplemental statement if needed. jis						
Document Formatting	Legal Secretary, Hall, Sue A	[add]	04/09/2012	04/02/2012	04/04/2012	Ha A
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Comments: SOA/STID in Legal In. Cost recovery (4 violations). E-mail sent to CO. File to Sue for service.glb						
Document Review	Paralegal, Banning, Gail L	[Charge Back]	03/30/2012	04/02/2012	03/30/2012	Ba Ge
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Comments: File to paralegal to review/complete SOA/STID in legal in. jis						
Draft - Initiating Documents	Staff Attorney, Staiger, Janet	[Charge Back]	03/30/2012	03/30/2012	03/30/2012	St Jai
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Action Info: Initiating Document Type SOA/STID						
Draft - Initiating Documents	Staff Attorney, Staiger, Janet	[Charge Back]	03/29/2012	03/29/2012	03/29/2012	St Jai
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Action Info: Initiating Document Type SOA/STID						
Case Review	Staff Attorney, Staiger, Janet	[Charge Back]	03/27/2012	03/27/2012	03/27/2012	St Jai
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Comments: Retd tc to OC w/ questions on case. Advised that case with legal for disciplinary action (STID). Per OC, client in case has since been released from prison and resumed counseling w/ the client. OC will wait for STID offer before providing any supplemental information. jis						
Draft - Initiating Documents	Staff Attorney, Staiger, Janet	[Charge Back]	03/23/2012	03/23/2012	03/23/2012	St Jai
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Action Info: Initiating Document Type SOA/STID						
Draft - Initiating Documents	Staff Attorney, Staiger, Janet	[Charge Back]	03/22/2012	03/22/2012	03/23/2012	St Jai
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Action Info: Initiating Document Type SOA/STID						
Draft - Initiating Documents	Staff Attorney, Staiger, Janet	[Charge Back]	03/21/2012	03/21/2012	03/23/2012	St Jai
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Action Info: Initiating Document Type SOA/STID						
Draft - Initiating Documents	Staff Attorney, Staiger, Janet	[Charge Back]	03/15/2012	03/15/2012	03/15/2012	St Jai
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Action Info: Initiating Document Type SOA/STID						
File Location	Staff Attorney, Staiger, Janet	[Charge Back]	03/13/2012	03/15/2012	03/13/2012	St Jai
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Comments: File w/ SA for tc on 3/14/12.jis						
Draft -	Staff Attorney,	[Charge	03/13/2012	03/13/2012	03/13/2012	St

Initiating Documents	Staiger, Janet	Back]				Jai
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Action Info: Initiating Document Type SOA/STID						
Draft - Initiating Documents	Staff Attorney, Staiger, Janet	[Charge Back]	03/12/2012	03/12/2012	03/12/2012	Stu Jai
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Action Info: Initiating Document Type SOA/STID						
Case Review	Staff Attorney, Staiger, Janet	[Charge Back]	08/08/2011	08/08/2011	08/08/2011	Stu Jai
Comments: Allegations are that R refused to provide client records to DOC. FILE TO HD SHELF. jis						
Case Review	Staff Attorney, Staiger, Janet	[Charge Back]	05/10/2011	05/10/2011	05/10/2011	Stu Jai
Draft - Initiating Documents	Staff Attorney, Staiger, Janet	[Charge Back]	12/15/2010	04/02/2012	12/15/2010	Ba Ga
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Action Info: Initiating Document Type SOA/STID						
Comments: FILE TO JANET FOR SOA/STID						
Change Master Case Owner	Staff Attorney, Staiger, Janet	[add]	12/15/2010	12/15/2010	12/15/2010	Bri Me
File Location	Paralegal, Banning, Gail L	[Charge Back]	12/13/2010	12/13/2010	12/13/2010	Ba Ga
Target: JOAN CAROL GOLSTON, SWI.LW.00004224						
Comments: Files to SA Assignment box.glb						
Intake	Legal Secretary, Legal Intake	[add]	12/13/2010	12/13/2010	12/13/2010	Bri Me
Case Status: Status Changed To: Pending Service						
Comments: FILE TO TRIAGE						

Credential View Screen [update]



JOAN CAROL GOLSTON Address: <input type="radio"/> Public <input checked="" type="radio"/> Mail <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> [change mail address] Joan Carol Golston 1404 E Yesler Way Ste 201 Seattle, WA 98122-5579 </div>	<table border="0"> <tr> <td>ID</td> <td>646639</td> </tr> <tr> <td>Warnings</td> <td>CE AUDIT ENFORCEMENT ACTION</td> </tr> <tr> <td>SSN/FEIN</td> <td><small>2 - DOH Licensee...</small></td> </tr> <tr> <td>Contact Standing</td> <td>Living</td> </tr> <tr> <td>Contact Type</td> <td>INDIVIDUAL</td> </tr> <tr> <td>Birth Date</td> <td>08/10/1947</td> </tr> <tr> <td>Public File</td> <td>YES</td> </tr> <tr> <td>Mailing List</td> <td></td> </tr> <tr> <td>US Citizen</td> <td></td> </tr> <tr> <td>Legacy Licensure Name</td> <td>GOLSTON, JOAN CAROL</td> </tr> </table>	ID	646639	Warnings	CE AUDIT ENFORCEMENT ACTION	SSN/FEIN	<small>2 - DOH Licensee...</small>	Contact Standing	Living	Contact Type	INDIVIDUAL	Birth Date	08/10/1947	Public File	YES	Mailing List		US Citizen		Legacy Licensure Name	GOLSTON, JOAN CAROL	<table border="0"> <tr><td>Contact</td></tr> <tr><td>Audit</td></tr> <tr><td>Enforcement View</td></tr> <tr><td>Cont. Edu</td></tr> <tr><td>Documents</td></tr> <tr><td>Owned By/Key Mgmt</td></tr> <tr><td>Exams</td></tr> <tr><td>Experience</td></tr> <tr><td>Notes</td></tr> <tr><td>Schools</td></tr> <tr><td>Librarian</td></tr> <tr><td>Other State License</td></tr> <tr><td>Online Information</td></tr> </table>	Contact	Audit	Enforcement View	Cont. Edu	Documents	Owned By/Key Mgmt	Exams	Experience	Notes	Schools	Librarian	Other State License	Online Information
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Comments:

Social Worker Independent Clinical License [update] [form letter]

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Comments:

- Supervises
- User Defined License Data
- Workflow
- Legacy

Supervises [update] [Show All]

No active Supervises Data.

[Legacy Authority History](#)
[Legacy Contact Information](#)
[Legacy Credential History](#)
[Legacy Renewal Information](#)
[Legacy Revenue History](#)

Current HIPDB Reports

Type	Submission Date	Status	DCN	Case ID
Initial	07/25/2012	Approved	<small>3 - National Practitioner Data...</small>	M2010-1574

Contact View Screen [update]



JOAN CAROL GOLSTON

Address: ☒ Public ☐ Mail

Joan Carol Golston
1404 E Yesler Way Ste 201
Seattle, WA 98122-5579

Preferred Communication Method:

ID
Warnings

SSN/FEIN
Contact Standing
Contact Type
Public File
Mailing List
US Citizen

846639
CE AUDIT
ENFORCEMENT ACTION
2 - DOH Licens...
Living
INDIVIDUAL
YES

Audit
Enforcement View
Cont. Edu
Documents
Owned By/Key Mgmt
Exams
Experience
Notes
Schools
Librarian
Other State License
Online Information

Comments:

- Addresses
- Individual Information
- Credential List
- Legacy

Contact Addresses [add]

Address Information	Contact Information	Update Addresses
Joan Carol Golston 1404 E Yesler Way Ste 201 Seattle, WA 98122-5579 County: King Country: United States Joined on: 02/16/2008 Last updated by Sandra L Taylor (DOH)	Phone (206) 328-1366 Fax (206) 328-8150 Cell Email jgolston@oz.net	[update] MAIN ADDRESS Contact Public Address Contact Mail Address Form Letter Public Address for: - SWI.LW.00004224 - RC.RC.00003527 Mail Address for: - SWI.LW.00004224 - RC.RC.00003527

Individual Information [update]

Field	Value	Field	Value
Birth Place		Gender	F
Birth Date	08/10/1947	Online User ID	GOLS646639

Credentials [add]

Credential	Sub	License Type	Effective Date	Expiration Date	Status	Reason
RC.RC.00003527 Joan Carol Golston 1404 E Yesler Way Ste 201 Seattle, WA 98122-5579		Counselor Registration	08/10/1991	08/10/1991	EXPIRED	CREDENTIAL NOT RENEWED
SW.SW.40000598 Joan Carol Golston 1404 E Yesler Way Ste 201 Seattle, WA 98122-5579		Social Worker Certificate		07/19/2001	EXPIRED	PROFESSION DISCONTINUED
SWI.LW.00004224 Joan Carol Golston 1404 E Yesler Way Ste 201 Seattle, WA 98122-5579		Social Worker Independent Clinical License	06/28/2012	08/10/2013	ACTIVE	ACTIVE

Legacy Contact Information

Legacy Credential History

Respondent's Name

TELEPHONE LOG

Joan Carol Golston Swi.Lw

DATE	COMMENTS	INITIALS



STATE OF WASHINGTON
DEPARTMENT OF HEALTH

November 22, 2013

Joan Golston
105 14th Ave, Suite 120
Seattle, WA 98122-5569

Subject: Master Case Number: M2010-1574
Credential Number: SWI.LW.00004224

Dear Ms. Golston:

We have released you from the requirements of your Stipulation to Informal Disposition for your Social Worker Independent Clinical License credential.

You have complied with the terms of the agreement. We wish you well in the future.

To view the action, go to <http://www.doh.wa.gov/hsqa> and select Provider/Facility Search.

Please contact Leslie Magby at (360) 236-4839 if you have any questions.

Sincerely,

Dianna M. Staley
Compliance Manager
Office of Legal Services
PO Box 47873
Olympia, WA 98504-7873
(360) 236-4930 (F)

cc: Adjudicative Clerk Office



SOCIAL WORKER COST RECOVERY

M2010-1574
OLS COMPLIANCE

NAME Joan C. Golston, DCSW, LICSW

AMOUNT \$ 1000.00

RECEIVED

AUG 06 2013

DOH/HSQA/OCS
CREDENTIALING

3 6272360003

RECEIVED

AUG 07 2013

LEGAL SERVICES
COMPLIANCE

MAIL TO:

DEPT OF HEALTH REVENUE
PO BOX 1099
OLYMPIA WA 98507-1099

OLD COMPLIANCE

1544-8/5/2013 7:46:58 AM-451

MAIL TO:
DEPT OF HEALTH & HUMAN SERVICES
PO BOX 1080
OLINGA WA 98504-1080

Magby, Leslie A (DOH)

From: Staley, Dianna (DOH)
Sent: Monday, July 29, 2013 8:25 AM
To: jgolston@oz.net
Cc: Magby, Leslie A (DOH)
Subject: RE: Completing our agreement - SWIC, M2010-1574, Joan Golston

Dear Ms. Golston: Your new compliance officer is Leslie Magby. I am copying Leslie on this email and she will respond to your questions. Her email is leslie.magby@doh.wa.gov. You may also call her at 360-236-4839.

Sincerely,

Dianna Staley

Compliance Manager
Office of Legal Services
Health Systems Quality Assurance
WA Department of Health
PO Box 47873
Olympia, WA 98504-7873
360-236-4607 (desk)
360-236-4930 (fax)

From: jgolston@gmail.com [<mailto:jgolston@gmail.com>] **On Behalf Of** Joan Golston
Sent: Sunday, July 28, 2013 11:04 AM
To: Staley, Dianna (DOH)
Subject: Completing our agreement

Dear Ms. Staley,

Thank you for taking over the management of my file (M2010-1574, SWI.LW.00004224). I am about to mail in my cashier's check, and wanted to ask you to confirm that your records show receipt of the certificates of completion for the two approved six hour continuing education courses I completed shortly after we made our agreement.

My records show that on 12/19/12 I emailed Ms. Chabot the certificate for HIPAA and Records Law, taken on 11/16/12, and that Ms. Chabot also emailed me confirmation that she'd received my faxed attendance certificate for an NASW course, The Art of Writing Mental Health Notes to Protect the Clinician, taken on September 7, 2012.

In addition, my memory says that there is a particular form you'd like mailed in with my cashier's check, but I cannot find it in my records. I have the Compliance Requirement Summary Worksheet, but nothing beyond that. I am sorry to trouble you, but could kindly you send me another copy of it?

Thank you for your help. I look forward to being able to satisfy the last portion of my agreement with the Department.

Sincerely,
Joan

On Thu, Dec 20, 2012 at 8:57 AM, Staley, Dianna (DOH) <dianna.staley@doh.wa.gov> wrote:

Dear Ms. Golston: Thank you for this information. Kimberly is no longer with the Department of Health. Until I fill her position, please contact me with any questions and send me the document for requirements you complete. Thank you.

Dianna Staley

Compliance Manager

Office of Legal Services

Health Systems Quality Assurance

WA Department of Health

PO Box 47873

Olympia, WA 98504-7873

360-236-4607 (desk)

360-236-4930 (fax)

--

Joan C. Golston, DCSW, LICSW
Director & Fellow, International Soc for the Study of Trauma & Dissociation (ISSTD)

Magby, Leslie A (DOH)

From: Staley, Dianna (DOH)
Sent: Tuesday, February 12, 2013 9:26 AM
To: Magby, Leslie A (DOH)
Subject: FW: Golston - continuing education certificate
Attachments: CCEcertificate-2293418.pdf

FYI. SW, M2010-1574.

From: jgolston@gmail.com [mailto:jgolston@gmail.com] On Behalf Of Joan Golston
Sent: Wednesday, December 19, 2012 12:21 PM
To: Chabot, Kimberly A
Subject: Golston - continuing education certificate

Dear Ms. Chabot,

Attached is the certificate of completion for the six hour course on HIPAA & Hitech requirements for record keeping and security. I apologize for the pause, but as you can see, the continuing education company took a long time to provide the certificate.

I will shortly prepare the cashier's check to cover Department expenses, as agreed, and will let you know when that is in the mail.

I very much appreciate how responsive you've been, how well-organized the process is, and how you have contributed to making the resolution of this regrettable situation both productive and pleasant.

Warm best wishes for this holiday season.

Regards,
Joan

----- Forwarded message -----

From: <customerservice@crosscountryeducation.com>
Date: Wed, Dec 19, 2012 at 10:24 AM
Subject: Your certificate from Cross Country Education
To: jgolston@oz.net

Thank you for using Cross Country Education for your continuing education needs. Attached to this email you will find the certificate for the seminar you attended.

If any correction needs to be made, or if you have any concerns please contact us at 1-800-397-0180. Anyone in the customer service department will be able to assist you.

Please DO NOT RESPOND TO THIS EMAIL. You may Email any questions or concerns to

customerservice@crosscountryeducation.com.

Thank you,

Customer Service

Cross Country Education

--

Joan C. Golston, DCSW, LICSW
Director & Fellow, International Society for the Study of Trauma &
Dissociation
Chair, Ethics, NASW-WA chapter

1404 E. Yesler Way, Ste. 201
Seattle, WA 98122
T:(206) 328 1366; F:(206) 328 8150
jpgolston@oz.net

This message and any attachments to it might contain confidential or privileged information protected by federal and state law. The information being transmitted is intended only for the use of the individual(s) or entities originally named as addressees. If this message was not intended for you, please be aware that improper disclosure, copying, forwarding or other use of what it contains may be subject to civil or criminal penalties, and is forbidden by law. If this message reached you in error, please accept my apologies, erase the message, and contact me. Thank you.

Any opinions expressed in this message are mine alone, and do not represent ISSTD or NASW policy.



CROSS COUNTRY
EDUCATION

Certificate of Completion

is issued to



CROSS COUNTRY
EDUCATION

Joan Golston

for participation in the course

HIPAA and Medical Records Law: Meeting the Privacy and Security Regulations

conducted in Seattle, WA, on 11/16/2012

Jeannie Staudt
Continuing Education
Cross Country Education

Greg D. Greene
President
Cross Country Education

This person has completed 6 of a possible 6 continuing educational hours; total continuing education credits available are determined by each applicable organization; see below.

Presented by: Joe Smith, MS, JD, LL.M.
This program has been granted prior approval by the American Association of Medical Assistants (AAMA) for 6 Continuing Education Units. Granting approval in no way constitutes endorsement by the AAMA of the program content or the program's sponsor. This program has the prior approval of the American Academy of Professional Nurses (AAPN) for 6 continuing education hours. Granting of prior approval in no way constitutes endorsement by the AAPN of the program content or the program's sponsor. AAPN approved grant this 03/21/2013. This program has been approved for 6 contact hours Continuing Respiratory Care Education (CRCE) credit by the American Association for Respiratory Care, AACRC in Respiratory Care. Suite 100 Irving TX 75039 Course #127403000. Cross Country Education is authorized to award 6 hours of pre-approved ACPE. Qualified Education credit must be submitted within 60 days of completion of the program. Participants in this program hoping to have the continuing education hours applied toward ACPE. Qualified Education credit should submit their attendance when submitting application to the American College of Healthcare Educators for endorsement or recognition. Cross Country Education is designated as an Approved PACE Program Provider by the Academy of General Dentistry. The total continuing education programs of the program provider are approved by AOD for Fellowship, Membership and membership maintenance credit. Approval does not imply endorsement by a state or provincial board of dentistry or AOD endorsement. The current list of approved credits from 10/1/2011 to 9/30/2015. It is offered for 6 credit hours. Provider ID# 217540. This program has been approved for 6 continuing education credits for use in fulfilling the continuing education requirements of the American Health Information Management Association (AHIMA). Granting prior approval from AHIMA does not constitute endorsement of the program content or its Program Sponsor. Cross Country Education, LLC is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation. This course is offered for 6 contact hours. Cross Country Education is approved by the California Board of Registered Nursing, Provider #CEP 13345, for 7.2 contact hours. Cross Country Education is an approved provider by the Florida Board of Nursing, provider #22646. This course is offered for 6.0 contact hours. Cross Country Education is an approved provider with the Iowa Board of Nursing, approved provider #326. This course is offered for 7.2 contact hours. Cross Country Education is an ACOTA Approved Provider of continuing education. This course is offered for 6 ACOTA CEUs. The coursework of ACOTA CEUs does not imply endorsement of specific course content, products, or clinical procedures by ACOTA. ACOTA Educational Unit. Internationally, Category 3 Professional Institute. Cross Country Education is approved by the American Psychological Association to sponsor continuing education for psychologists. Cross Country Education maintains responsibility for the program and its content. This program offers 6 CEU credits for psychologists. Full attendance is required to receive credit for psychologists, variable credit for partial attendance may not be essential based on the APA guidelines. Cross Country Education provider #1025, is approved as a provider for social work continuing education by the Association of Social Work License Boards (ASWB), through the Approved Continuing Education (ACE) program (an approved provider since 1998, approved through 1-27-15). Cross Country Education maintains responsibility for the program. Social workers will receive 6 continuing education clock hours for participating in this course. Licensed social workers should contact their individual state jurisdiction to review the current continuing education requirements for licensure renewal. Visit ASWB's website at www.aswb.org for more information. CCMEC Approved Activity. The course fees above was implemented on November 12, 14, 15 or 16, 2012 and is approved for 6 CEUs. Approval number 700000479. To obtain these CEUs, log on your CE Center account at www.ccecenter.org. This program is approved for Category 3, 6 hours of continuing education credit by the Dental Resolving National Board, Inc. (Approved #0200-000-15-15) Course Approval for QMMS CCE. Credit. Credits earned upon completion of this course may be used to meet DABVT's Recertification Requirements. Approved for DABVT CCE credit does not imply DABVT endorsement of or affiliation with the course or course sponsor or provider. Cross Country Education is an approved provider by NABCC Approved Education Program Provider #2865. This course is offered for 6 contact hours. Cross Country Education is a Certified Sponsor of professional continuing education with the National Association of Long Term Care Administrator Boards (NALTB) and has approved this program for the number of clock hours listed under their sponsor agreement with NABCCERS. State Boards have, however, have final authority on the acceptance of individual courses. Cross Country Education is an NBCC Approved Continuing Education Provider (ACEP™) and may offer NBCC approved clock hours for events that meet NBCC requirements (NBCC Provider #00046). The ACEP solely is responsible for all aspects of the program. For (6) contact (clock) hours are being awarded for completion of this program. Cross Country Education, LLC is approved by the National Certification Board for Therapeutic Massage and Bodywork (NCBTMB) as a continuing education Approved Provider. Provider #000123486. This course is offered for 6 CEU hours. 100% attendance is required for a Certificate of Completion to be issued. No variable credit is given. HIPAA and Medical Records Law meets the criteria of the Professional Association of Health Care Office Management and is approved for 6 CEUs. Cross Country Education, LLC is accredited by the Association to Advance Collegiate Schools of Business International (AACSB) as a provider of continuing education. ACPE Universal Activity Number 0497-0000-11-000-AD-PEF, Tennessee-Based. This seminar is offered for 6 ACPE contact hours. Statements of Continuing Professional Education Credit will be mailed within 6 months following the program. Full attendance is required to receive 6 ACPE contact hours and upon completion of the Seminar Education Plan, in the event of late arrival or early departure, approved attendance and Statements of Credit reflecting the actual number of credit hours earned will be provided upon calling Cross Country Education. This educational offering is offered for 6 hours of continuing education of which 1 hour includes discussion of ethics issues. The educational offering qualifies for 6 continuing education hours as required by many national, state and local licensing boards and professional organizations. Save your course outline and certificate of completion, and contact your own board or organization for specific filing requirements.

License # _____ Your SS#: _____ Your Home Address: _____

9020 Overlook Blvd * Suite 140 * Brentwood, Tennessee 37027 * 1-800-397-0180

Staley, Dianna (DOH)

From: jgolston@gmail.com on behalf of Joan Golston [jgolston@oz.net]
Sent: Wednesday, December 19, 2012 12:21 PM
To: Chabot, Kimberly A
Subject: Golston - continuing education certificate
Attachments: CCEcertificate-2293418.pdf

Dear Ms. Chabot,

Attached is the certificate of completion for the six hour course on HIPAA & Hitech requirements for record keeping and security. I apologize for the pause, but as you can see, the continuing education company took a long time to provide the certificate.

I will shortly prepare the cashier's check to cover Department expenses, as agreed, and will let you know when that is in the mail.

I very much appreciate how responsive you've been, how well-organized the process is, and how you have contributed to making the resolution of this regrettable situation both productive and pleasant.

Warm best wishes for this holiday season.

Regards,
Joan

----- Forwarded message -----

From: <customerservice@crosscountryeducation.com>
Date: Wed, Dec 19, 2012 at 10:24 AM
Subject: Your certificate from Cross Country Education
To: jgolston@oz.net

Thank you for using Cross Country Education for your continuing education needs. Attached to this email you will find the certificate for the seminar you attended.

If any correction needs to be made, or if you have any concerns please contact us at [1-800-397-0180](tel:1-800-397-0180). Anyone in the customer service department will be able to assist you.

Please DO NOT RESPOND TO THIS EMAIL. You may Email any questions or concerns to

customerservice@crosscountryeducation.com.

Thank you,

Customer Service

--

Joan C. Golston, DCSW, LICSW
Director & Fellow, International Society for the Study of Trauma &
Dissociation
Chair, Ethics, NASW-WA chapter

1404 E. Yesler Way, Ste. 201
Seattle, WA 98122
T:(206) 328 1366; F:(206) 328 8150
jgolston@oz.net

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Any opinions expressed in this message are mine alone, and do not represent ISSTD or NASW policy.



is issued to

Joan Golston

for participation in the course

HIPAA and Medical Records Law: Meeting the Privacy and Security Regulations

conducted in Seattle, WA, on 11/16/2012

Jeanie Standb

Jeannie Staudt
Continuing Education
Cross Country Education

Ende

Greg D. Greene
President
Cross Country Education

This person has completed 6 of a possible 6 continuing educational hours; total continuing education credits available are determined by each applicable organization; see below.

[illegible]

License # _____ **Your SS#:** _____ **Your Home Address:** _____

9020 Overlook Blvd * Suite 140 * Brentwood, Tennessee 37027 * 1-800-397-0180

Chabot, Kimberly A (DOH)

From: Chabot, Kimberly A (DOH)
Sent: Monday, October 15, 2012 11:43 AM
To: 'Joan Golston'
Subject: RE: Continuing education opportunity

Dear Ms. Golston,
The program manager has approved the course you provided below.
Sincerely,
Kimberly Chabot

From: jgolston@gmail.com [mailto:jgolston@gmail.com] **On Behalf Of** Joan Golston
Sent: Saturday, October 13, 2012 4:11 AM
To: Chabot, Kimberly A (DOH)
Subject: Continuing education opportunity

Dear Ms. Chabot,

It turns out to be harder than one might expect to find useful continuing education workshops that are primarily focused on records-related issues. I also didn't want to duplicate the material in the workshop I completed last month. However, I think I've located something interesting and potentially useful. It appears to emphasize HIPAA, with material on an area I know nothing about - electronic records, and it offers a number of practical forms and a reference manual, apparently adapted to Washington state's requirements.

Below you will find the course description and a link to the related website and workshop page. I do not need to send in my registration until early in November, so at your convenience, could kindly you review this and see if it meets your expectations?

Thank you as always for your assistance.

Warm regards,
Joan

HIPAA and Medical Records Law: Meeting the Privacy and Security Regulations, by Joe Borich
Renton, WA 11/16/2012, 8:00AM - 3:30PM

Chabot, Kimberly A (DOH)

From: jgolston@gmail.com on behalf of Joan Golston [jgolston@oz.net]
Sent: Saturday, October 13, 2012 4:11 AM
To: Chabot, Kimberly A (DOH)
Subject: Continuing education opportunity

Dear Ms. Chabot,

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Thank you as always for your assistance.

Warm regards,
Joan

HIPAA and Medical Records Law: Meeting the Privacy and Security Regulations, by Joe Borich
Renton, WA 11/16/2012, 8:00AM - 3:30PM

HIPAA Compliance

Now that the HIPAA compliance deadline has passed, health care providers have been struggling to comply with the unique challenges this regulation brings. Forms and privacy notifications have become the norm in the health care industry. But is your practice covering all of its bases and ensuring that your patients' information is protected? Do you know how to properly handle requests for medical records? Are you aware of the penalties that could result if reasonable safeguards are not taken? Do you know how to deal with sensitive records regarding information on minors, AIDS and mental health? Are your electronic billing practices secured?

Attend this one-day seminar and receive the answers to all these questions and more. Attendees will discuss the three major components to HIPAA compliance: privacy, security and electronic transactions. You will be given a step-by-step guide to guarantee that your practice or facility is fully secure. Information pertaining to writing the required policies, procedures and consents will be discussed, as well as samples of all required forms. Attendees will leave this seminar armed with all the information needed to comply with the HIPAA regulations.

- Receive a compliance checklist, procedural forms and training certificate
- Discuss the most current HIPAA requirements and penalties
- Review the HIPAA electronic transaction and code sets rule
- Identify the challenges and exceptions to confidentiality when dealing with records regarding AIDS, mental health, abortion and minors
- Determine the best course of action when state and federal laws contradict one another
- Explain the most common mistakes made when using electronic billing
- Assess how you can simplify the process and take cost-effective security measures
- Outline Medicare and Medicaid fraud implications
- *Examine mandatory medical records and billing—It is on the horizon! Be prepared.*
- Discuss regulations regarding the three biggest issues in HIPAA: privacy, patient records access and record retention

You Will Receive:

- Reference manual
- Copy of regulations (privacy and security)
- Audit HIPAA checklist
- Your state law handout
- Valid HIPAA authorization
- Valid business associate contract
- Valid privacy notice (in English and Spanish)
- HIPAA policy and procedural forms
- Government security matrix grid
- Certificate of training

JOE BORICH, III, JD, LLM, has served as a certified mediator, author, and a practicing attorney for over 30 years. He currently has his own firm in Kansas City, Kansas, where he provides legal, consulting, and business coaching services for the health care industry. Throughout his legal career, Mr. Borich has worked extensively in the area of medical records and personal privacy and has considerable litigation experience in health care

related cases, including serving as the defense attorney in the nation's largest Medicare anti-kickback prosecution.

He has also worked for the Department of Justice and served as an Assistant Attorney General stationed in New York and Washington, D.C. Mr. Borich is an accomplished speaker, having given seminars for Cross Country Education for nearly a decade. He uses his experience, anecdotes, and first-hand knowledge to deliver a complete learning experience while always providing audiences with valuable, up-to-date information about state and federal law.

<https://www.crosscountryeducation.com/cce/product/showLiveSeminarDetails.do?expressCode=260976&productType=S&seminarCode=SEAT111612>

--

Joan C. Golston, DCSW, LICSW
Director & Fellow, International Society for the Study of Trauma &
Dissociation
Chair, Ethics, NASW-WA chapter

1404 E. Yesler Way, Ste. 201
Seattle, WA 98122
T:(206) 328 1366; F:(206) 328 8150
jgolston@oz.net

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Any opinions expressed in this message are mine alone, and do not represent ISSTD or NASW policy.

Chabot, Kimberly A (DOH)

From: Chabot, Kimberly A (DOH)
Sent: Thursday, September 20, 2012 11:53 AM
To: 'Joan Golston'
Subject: RE: Request re continuing education requirement

Dear Ms. Golston,

Thank you for providing the certificate of completion. I will note it in your file. I appreciate the proactive actions to meet all the requirements of your agreement.

Sincerely,

Kimberly Chabot
Compliance Officer
Department of Health
Office of Legal Services
P.O. Box 47873
Olympia, WA 98504-7873
(360) 236-4839 (P)
(360) 236-4930 (FX)
kimberly.chabot@DOH.WA.GOV

From: jgolston@gmail.com [mailto:jgolston@gmail.com] **On Behalf Of** Joan Golston
Sent: Wednesday, September 19, 2012 10:13 PM
To: Chabot, Kimberly A (DOH)
Subject: Re: Request re continuing education requirement

Dear Ms. Chabot,

Today's mail brought the NASW certificate of completion for the September 7th workshop on mental health notes, and I have just now faxed it to you. You will see that it provided six CE credits in law and ethics, although again, I understand that these units are in addition to the ones I would accumulate ordinarily. Please let me know if the fax doesn't come through, or if you need further information.

I will shortly seek out another continuing education opportunity and provide the details for your consideration in advance.

Thank you as before for your help in making these arrangements.

Warm regards,
Joan

On Thu, Sep 6, 2012 at 8:52 AM, Chabot, Kimberly A (DOH) <Kimberly.Chabot@doh.wa.gov> wrote:

Dear Ms. Golston,

The course has been approved. Please send me certificates of completion when they are available. If you have any questions, please don't hesitate to contact me.

For address changes go to:

<http://www.doh.wa.gov/LicensesPermitsandCertificates/ProfessionsNewReneworUpdate/LicenseRenewals.aspx>

Customer Service: 360-236-4700.

Credentialing Unit: 360-236-4900.

Sincerely,

Kimberly Chabot

Compliance Officer

Department of Health

Office of Legal Services

P.O. Box 47873

Olympia, WA 98504-7873

(360) 236-4839 (P)

(360) 236-4930 (FX)

kimberly.chabot@DOH.WA.GOV

From: jgolston@gmail.com [mailto:jgolston@gmail.com] **On Behalf Of** Joan Golston
Sent: Tuesday, September 04, 2012 10:40 PM

JOAN C. GOLSTON, DCSW, LICSW

1404 EAST YESLER WAY, STE. 201

SEATTLE, WA USA 98122

206-328-1366; F:206-328-8150; JGOLSTON@OZ.NET

RECEIVED

SEP 20 2012

Department of Health
Legal Services Unit

FACSIMILE TRANSMITTAL SHEET

TO: Kimberly Chabot	FROM: Joan
COMPANY: Dept. of Health, Legal Services	DATE: 9/19/2012
FAX NUMBER: 360-236-4930	TOTAL NO. OF PAGES INCLUDING COVER: 2
PHONE NUMBER:	SENDER'S REFERENCE NUMBER:
RE: CE certificate	YOUR REFERENCE NUMBER:

☐ URGENT ☐ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY ☐ PLEASE RECYCLE

NOTES/COMMENTS:

All or part of the material transmitted herewith is confidential, and may be privileged or otherwise protected by federal or state statutes or regulations. If you are not the intended recipient, please shred the attached documents and notify the sender that it has gone astray. Thank you.

RECEIVED
SEP 20 2012
LEGAL SERVICES
COMPLIANCE



NATIONAL ASSOCIATION OF SOCIAL WORKERS

Washington State Chapter

522 North 85th Street, #B100

Seattle, WA 98103

206-706-7084 * Fax 206-706-7085

NASW Provider Number: 1975-25

CONTINUING EDUCATION UNITS CERTIFICATE

COMPLETION DATE: September 7, 2012
PLACE: North Seattle Community College, Seattle, WA
TITLE OF COURSE: "The Art of Writing Mental Health Notes to Protect the Clinician"

"THE ART OF WRITING MENTAL HEALTH NOTES TO PROTECT THE CLINICIAN"

PRESENTED BY FEDERICO GROSSO, PHD, MFT, BCFE

Six (6) hours of Continuing Education Credits approved for this workshop.
This workshop is approved for Six (6) hours Law & Ethics.

6

Licensed Social Worker

Licensed Marriage & Family Counselor

Licensed Mental Health Counselor

NAME:

Joan Golston

I hereby certify that the above named participant attended this conference.

Hoyt Suppes, Executive Director
NASW Washington State Chapter

This certificate must be retained for a period of one year after re-certification.

*** FAX RX REPORT ***

RECEPTION OK

JOB NO.	5047
DESTINATION ADDRESS	2063288150
PSWD/SUBADDRESS	
DESTINATION ID	
ST. TIME	09/19 22:05
USAGE T	00' 46
PGS.	2
RESULT	OK

Chabot, Kimberly A (DOH)

From: jgolston@gmail.com on behalf of Joan Golston [jgolston@oz.net]
Sent: Thursday, September 06, 2012 6:42 PM
To: Chabot, Kimberly A (DOH)
Subject: Re: Request re continuing education requirement

Indeed, I do hope to get the benefits and satisfy the obligations of this agreement promptly, Ms. Chabon.

I believe this day long course grants six CE hours. I will confirm that tomorrow, and mail the certificate to you after that. I trust it's ok to send you a photocopy so that I can keep the original in my records? I know that these hours are in addition to the hours I accumulate for the renewal of my license, but keep records of all my professional education, which often exceeds the requisite hours for license renewal as it is. Thank you for your help in this.

Warm regards,
Joan

On Thu, Sep 6, 2012 at 1:53 PM, Chabot, Kimberly A (DOH) <Kimberly.Chabot@doh.wa.gov> wrote:

Thank you Ms. Golston. your prompt attention to the details of the requirements is appreciated. Do you know how many CE hours are designated for this course?

From: jgolston@gmail.com [mailto:jgolston@gmail.com] On Behalf Of Joan Golston
Sent: Thursday, September 06, 2012 12:31 PM

To: Chabot, Kimberly A (DOH)
Subject: Re: Request re continuing education requirement

Thank you so much for making the necessary arrangements, Ms. Chabot. I particularly appreciate that the time frame was short and you are just now back from some time off. I will send you the certificate of completion when the program is finished.

Warm regards, Joan

Chabot, Kimberly A (DOH)

From: Chabot, Kimberly A (DOH)
Sent: Thursday, September 06, 2012 10:42 AM
To: 'Joan Golston'
Subject: RE: Request re continuing education requirement

Dear Ms. Golston,

I wanted to record the course as being approved, but was unable to determine the number of CE hours of this course. Can you tell me how many CE's? If you have taken the course as planned the certificate of completion should show the CE' hours. Please forward the completion verification when it is available.

Sincerely,

Kimberly

From: Chabot, Kimberly A (DOH)
Sent: Thursday, September 06, 2012 8:52 AM
To: 'Joan Golston'
Subject: RE: Request re continuing education requirement

Dear Ms. Golston,

The course has been approved. Please send me certificates of completion when they are available. If you have any questions, please don't hesitate to contact me.

For address changes go to:

<http://www.doh.wa.gov/LicensesPermitsandCertificates/ProfessionsNewReneworUpdate/LicenseRenewals.aspx>

Customer Service: 360-236-4700.

Credentialing Unit: 360-236-4900.

Sincerely,

Kimberly Chabot
Compliance Officer
Department of Health
Office of Legal Services
P.O. Box 47873
Olympia, WA 98504-7873
(360) 236-4839 (P)
(360) 236-4930 (FX)
kimberly.chabot@DOH.WA.GOV

From: jgolston@gmail.com [<mailto:jgolston@gmail.com>] **On Behalf Of** Joan Golston
Sent: Tuesday, September 04, 2012 10:40 PM
To: Chabot, Kimberly A (DOH)
Subject: Request re continuing education requirement

Chabot, Kimberly A (DOH)

From: Chabot, Kimberly A (DOH)
Sent: Thursday, September 06, 2012 8:52 AM
To: 'Joan Golston'
Subject: RE: Request re continuing education requirement

Dear Ms. Golston,

The course has been approved. Please send me certificates of completion when they are available. If you have any questions, please don't hesitate to contact me.

For address changes go to:

<http://www.doh.wa.gov/LicensesPermitsandCertificates/ProfessionsNewReneworUpdate/LicenseRenewals.aspx>

Customer Service: 360-236-4700.

Credentialing Unit: 360-236-4900.

Sincerely,

Kimberly Chabot
Compliance Officer
Department of Health
Office of Legal Services
P.O. Box 47873
Olympia, WA 98504-7873
(360) 236-4839 (P)
(360) 236-4930 (FX)
kimberly.chabot@DOH.WA.GOV

From: jgolston@gmail.com [mailto:jgolston@gmail.com] **On Behalf Of** Joan Golston
Sent: Tuesday, September 04, 2012 10:40 PM
To: Chabot, Kimberly A (DOH)
Subject: Request re continuing education requirement

Re: Master case #M2010-1574
SWI.LW.00004224

Dear Ms. Chabot,

Thank you for sending me the information I'll need to satisfy the terms of my agreement with the Department. I anticipate meeting the requirements rather promptly, in part so I can be sure I'm current in my understanding of the standards with regard to records.

I have become aware of a workshop sponsored by the Washington State Chapter of the

Chabot, Kimberly A (DOH)

From: jgolston@gmail.com on behalf of Joan Golston [jgolston@oz.net]
Sent: Tuesday, September 04, 2012 10:40 PM
To: Chabot, Kimberly A (DOH)
Subject: Request re continuing education requirement

Re: Master case #M2010-1574
SWI.LW.00004224

Dear Ms. Chabot,

Thank you for sending me the information I'll need to satisfy the terms of my agreement with the Department. I anticipate meeting the requirements rather promptly, in part so I can be sure I'm current in my understanding of the standards with regard to records.

I have become aware of a workshop sponsored by the Washington State Chapter of the National Association of Social Workers that seems pertinent to the subject at hand. The description is at <http://www.nasw-wa.org/displaycommon.cfm?an=1&subarticlenbr=5>, and I have pasted it below as well. I am not so much interested in the defensive nature of note-taking but in what Dr. Grosso has to teach about the standard for the content and amount of detail in records, and for disclosing them.

I realize that this is short notice since the workshop is this coming Friday, and so if that isn't enough advanced notice, I will go ahead and enroll in the workshop for my own edification and wait for another opportunity that I can identify in sufficient time for you.

Here is the description:

The Art of Writing Mental Health Notes to Protect the Clinician

Presenter: Federico Grosso, PhD, MFT, BCFE

Course Description: This course addresses the standard of care for keeping mental health records for LCSWs and other master level clinicians. This standard includes the content of mental health records, the types of forms essential in public or private practice, using these forms effectively to support the clinician's professional duty, and writing succinct progress notes. Should third parties, which may include opposing attorneys find it necessary to read the clinicians records, having appropriate mental health records can diminish any potential exposure that can lead to unnecessary clinical and/or legal challenges.

Course Outline

- A. Unpredictable Clinical Danger**
- B. The Problem With Inappropriate Clinical Records**

C. Resolving the Clinical Danger With Appropriate Clinical Records

D. The Continuous Protection of the Clinician Using Appropriate Mental Health Records

Learning Objectives

- 1. Using large and small group activities, visual elements, discussion and participatory practical exercises, participants will learn the differences between inappropriate versus appropriate clinical documentation.**
- 2. Using the same format as in number 1, participants will learn to use the appropriate structure to protect themselves from unpredictable clinical challenges that may lead to legal actions.**
- 3. Participants will use small and large group activities to practice the documentation assessment, diagnostic, and treatment protocols. In these groups, participants will learn to integrate these protocols into a repeatable structure to write records that will serve to protect them throughout their professional experience.**

About the Presenter:

Federico Grosso, PhD, MFT, BCFE, is a licensed marriage and family therapist in forensic private forensic practice in Santa Barbara, California. He is an author, academician, consultant, expert witness, and lecturer in the area of legal and ethical guidelines for marriage and family therapists, clinical social workers, licensed professional counselors and drug and alcohol counselors. He serves as a successful and effective expert witness in malpractice and administrative actions in this field and provides consultation to attorneys on the strengths and weaknesses of their malpractices. Dr. Grosso limits his practice to consulting with attorneys and serving as an expert witness in legal actions involving LCSWs and MFTs. Attorneys recognize and appreciate his ability as an expert witness. This experience is translated into practical and effective course content allowing clinicians to create clinical safety by recognizing that "reasonable and prudent" care offers greater freedom and versatility than being "right" or "perfect" in the delivery of psychotherapy.

Dr. Grosso is currently an official lecturer for the California Chapter of the National Association of Social Workers. In addition to serving as an expert witness in California, he consults on malpractice cases and lecture throughout the United States. His publications are widely used in psychotherapy academic programs and by attorneys who specialize in mental health malpractice. He has addressed the standard of care for Mental Health Records and Mental Health Treatment

Thank you for considering this request.

Sincerely,

Joan

--

**Joan C. Golston, DCSW, LICSW
Director & Fellow, International Society for the Study of Trauma &
Dissociation
Chair, Ethics, NASW-WA chapter**

**1404 E. Yesler Way, Ste. 201
Seattle, WA 98122
T:(206) 328 1366; F:(206) 328 8150**

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Any opinions expressed in this message are mine alone, and do not represent ISSTD or NASW policy.



STATE OF WASHINGTON
DEPARTMENT OF HEALTH

July 26, 2012

Joan Carol Golston
1404 E Yesler Way Ste 201
Seattle, WA 98122-5579

Subject: Master Case Number: M2010-1574
Credential Number: SWI.LW.00004224

Dear Ms. Golston:

Enclosed is a summary of your compliance requirements, revenue fee slips that must accompany your cost reimbursement payment(s), a continuing education instruction (CE) form, a list of CE website options, and compliance FAQ. Please contact me as soon as possible regarding the continuing education process.

You must comply with the terms of your final agreement. To view this action, go to www.doh.wa.gov/. Under "How do I", click on "Look up a healthcare provider license".

We suggest you keep copies of all paperwork you submit to our office.

For questions concerning your **credential application** or the **status of your credential**, please contact the credentialing unit at (360) 236-4900.

Please contact me if you have any questions regarding your **compliance requirements**.

Sincerely,

Kimberly Chabot
Compliance Officer
PO Box 47873
Olympia, WA 98504-7873
Kimberly.chabot@doh.wa.gov
(360) 236-4839 (P)
(360) 236-4930 (F)

Enclosures

cc: A. Stephen Anderson, Attorney





STATE OF WASHINGTON
DEPARTMENT OF HEALTH

comp
RECEIVED
JUL 25 2012
OFFICE OF LEGAL SERVICES

July 23, 2012

Joan Carol Golston
1404 E Yesler Way Ste 201
Seattle, WA 98122-5579

A. Stephen Anderson
Canal Street Building
146 North Canal Street, Ste. 350
Seattle, WA 98103

RE: Master Case No. M2010-1574

Dear Ms. Golston:

Enclosed please find Declaration of Service by Mail and Stipulation to Informal Disposition dated July 23, 2012.

Any questions regarding the terms and conditions of the Stipulation to Informal Disposition should be directed to Kimberly Chabot, Compliance Officer at (360) 236-4839.

Sincerely,



Gerene Moniz, Hearing Scheduler
Adjudicative Clerk Office
PO Box 47879
Olympia, WA 98504-7879

cc:

Tammy Kelley, Case Manager
Kimberly Chabot, Compliance Officer
Janet Staiger, Legal Unit

Enclosure

RECEIVED
JUL 25 2012
LEGAL SERVICES
COMPLIANCE



**STATE OF WASHINGTON
DEPARTMENT OF HEALTH
ADJUDICATIVE SERVICE UNIT**

In the Matter of:

JOAN C GOLSTON
Credential No. SWI.LW.00004224

Respondent.

Master Case No. M2010-1574

**DECLARATION OF SERVICE
BY MAIL**

I declare under penalty of perjury, under the laws of the state of Washington, that the following is true and correct:

On July 23, 2012, I served a true and correct copy of the Stipulation to Informal Disposition, signed by the Presiding Officer on July 23, 2012, by placing same in the U.S. mail by 5:00 p.m., postage prepaid, on the following parties to this case:

Joan Carol Golston
1404 E Yesler Way Ste 201
Seattle, WA 98122-5579

A. Stephen Anderson
Canal Street Building
146 North Canal Street, Ste. 350
Seattle, WA 98103

Janet Staiger
Department of Health
PO Box 47873
Olympia, WA 98504-7873

DATED: THIS 23RD DAY OF JULY, 2012.



Gerene Moniz, Adjudicative Clerk Office
Hearing Scheduler

cc: Tammy Kelley, Case Manager
Kimberly Chabot, Compliance Officer
Janet Staiger, Legal Unit

**STATE OF WASHINGTON
DEPARTMENT OF HEALTH
SECRETARY OF HEALTH**

In the Matter of

JOAN C. GOLSTON
Credential No. SWI.LW.00004224

Respondent

No. M2010-1574

**STIPULATION TO INFORMAL
DISPOSITION**

1. STIPULATION

1.1 The Executive Director of the Licensed Social Worker Program (Program), on designation by the Secretary of Health (Secretary), has made the following allegations.

- A. On July 22, 2001, the state of Washington issued Respondent a credential to practice as a licensed social worker – independent clinical. Respondent's credential is currently active.
- B. On or about August 2008, Client A was arrested and charged with criminal mistreatment of a child. On or about January 2009, Client A's criminal defense attorney referred Client A to Respondent for mental health treatment. Client A was diagnosed with post traumatic stress disorder and dissociative identity disorder. Respondent provided treatment to Client A to stabilize her mental condition during criminal proceedings.
- C. On or about January 16, 2009 through November 6, 2009, Respondent provided mental health therapy treatment to Client A for a total of ninety-five (95) sessions.
- D. Therapy sessions terminated on or about November 6, 2009, when Client A was convicted and sentenced to three and a half (3 ½) years at the Washington Correction Center for Women (WCCW) in Gig Harbor, Washington. Client A was released from prison on or about July 2011. After Client A's release from prison, she resumed treatment with Respondent.
- E. On or about June 10, 2010, while incarcerated at WCCW, Client A signed a written authorization for Respondent to release her treatment records to

the prison psychologist. On or about August 30, 2010, Client A's prison psychologist contacted Respondent by telephone to inquire about the release of treatment records. At such time, Respondent refused to release Client A's complete treatment records, stating that it was not in the best interest of Client A. Respondent offered instead to provide a brief summary and testing results. On or about October 2010, Respondent sent a written summary of treatment to the prison psychologist in charge of Client A's care.

1.2 Respondent does not admit any of the allegations in the Statement of Allegations and Summary of Evidence or in Paragraph 1.1 above. This Stipulation to Informal Disposition (Stipulation) shall not be construed as a finding of unprofessional conduct or inability to practice.

1.3 Respondent acknowledges that a finding of unprofessional conduct or inability to practice based on the above allegations, if proven, would constitute grounds for discipline under RCW 18.130.180(7); RCW 70.02.030(1), (3) and (8); and RCW 70.02.090.

1.4 Respondent agrees that any sanction as set forth in RCW 18.130.160, except subsections (1), (2), (6) and (8), may be imposed as part of this stipulation, but the Respondent may agree to reimburse the disciplining authority the costs of investigation and processing the complaint up to an amount not exceeding one thousand dollars (\$1,000.00) per allegation.

1.5 The parties wish to resolve this matter by means of a Stipulation pursuant to RCW 18.130.172(1).

1.6 This Stipulation is of no force and effect and is not binding on the parties unless and until it is accepted by the Secretary.

1.7 This Stipulation is not formal disciplinary action. However, if the Secretary accepts this Stipulation, it will be reported to the Health Integrity and Protection Databank (45 CFR Part 61), the National Practitioner Databank (45 CFR Part 60) and elsewhere as required by law. It is a public document and will be placed on the Department of Health's website and otherwise disseminated as required by the Public Records Act (Chap. 42.56 RCW).

//

1.8 The Secretary agrees to forego further disciplinary proceedings concerning the allegations.

1.9 Respondent agrees to successfully complete the terms and conditions of this informal disposition.

1.10 Respondent understands that a violation of this Stipulation, if proven, would constitute grounds for discipline under RCW 18.130.180 and the imposition of sanctions under RCW 18.130.160.

2. COMPLIANCE WITH SANCTION RULES

2.1 The disciplining authority applies WAC 246-16-800, *et seq.*, to determine appropriate sanctions. WAC 246-16-800(2)(c) requires the disciplining authority to impose terms based on a specific sanction schedule unless "the schedule does not adequately address the facts in a case."

2.2 Respondent's alleged conduct falls in Tier A of the "Practice Below Standard of Care" schedule, WAC 246-16-810. The sanction range associated with that tier does adequately address the alleged facts of this case.

2.3 The disciplining authority considered the following aggravating factors:

A. None noted.

2.4 The disciplining authority considered the following mitigating factors:

A. No prior disciplinary action.

B. Isolated incident unlikely to reoccur.

C. Length of time and experience in practice.

3. INFORMAL DISPOSITION

The parties agree to the following:

3.1 Respondent shall reimburse costs to the Program in the amount of one thousand dollars (\$1,000.00), which must be received by the Program within two (2) years of the effective date of this Stipulation. The reimbursement shall be paid by certified or cashier's check or money order, made payable to the Department of Health and mailed to the Department of Health, Licensed Social Worker Program at PO Box 1099, Olympia, WA 98507-1099. Credit or Debit cards can also be used for payment at the front counter of the Department of Health building at 111 Israel Road SE, Tumwater, WA 98501, during regular business hours.

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3.2 In addition to mandatory continuing education, within one (1) year of the effective date of this Stipulation, Respondent shall complete twelve (12) hours of continuing education, pre-approved by the Program or its designee, as follows: Twelve (12) hours of continuing education in the area of Record Maintenance and Record Requests. Respondent shall provide the Compliance Unit with proof of completion of such course-work within thirty (30) days of such completion. Failure to complete the required minimum hours of pre-approved continuing education in the specified areas within the specified time(s) shall constitute a violation of this Stipulation.

3.3 Any documents required by this Stipulation shall be sent to the Department of Health, Compliance Unit at PO Box 47873, Olympia, WA 98504-7873.

3.4 Respondent is responsible for all costs of complying with this Stipulation.

3.5 Respondent shall inform the Department of Health Office of Customer Service, in writing, of changes in Respondent's residential and/or business address within thirty (30) days of the change. The mailing address for the Office of Customer Service is PO Box 47865, Olympia, WA 98504-7865.

3.6 The effective date of this Stipulation is the date the Adjudicative Clerk Office places the signed Stipulation into the U.S. mail. If required, Respondent shall not submit any fees or compliance documents until after the effective date of this Stipulation.

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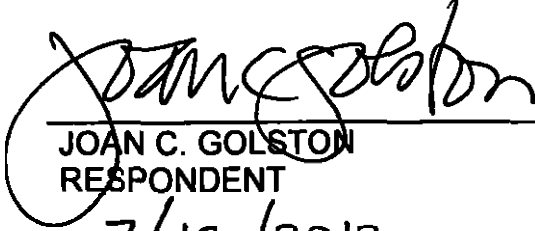
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4. RESPONDENT'S ACCEPTANCE

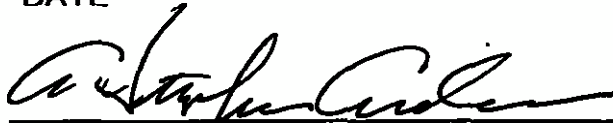
I, JOAN C. GOLSTON, have read, understand and agree to this Stipulation. This Stipulation may be presented to the Secretary without my appearance. I understand that I will receive a signed copy if the Secretary accepts this Stipulation.



JOAN C. GOLSTON
RESPONDENT

7/12/2012

DATE



A. STEPHEN ANDERSON, WSBA #8369
ATTORNEY FOR RESPONDENT


7/12/2012

DATE

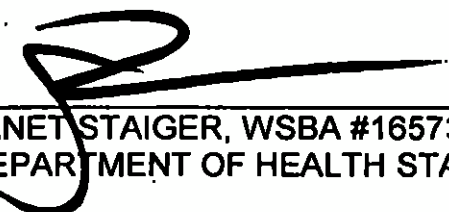
5. SECRETARY ACCEPTANCE

The Secretary of Health accepts this Stipulation to Informal Disposition. All parties shall be bound by its terms and conditions.

DATED: July 23, 2012


HEALTH LAW JUDGE

PRESENTED BY:


JANET STAIGER, WSBA #16573
DEPARTMENT OF HEALTH STAFF ATTORNEY

7.19.12
DATE

FILED

JUL 19 2012

Adjudicative Clerk

**STATE OF WASHINGTON
DEPARTMENT OF HEALTH
SECRETARY OF HEALTH**

In the Matter of

JOAN C. GOLSTON
Credential No. SWI.LW.00004224

Respondent

No. M2010-1574

**STATEMENT OF ALLEGATIONS
AND SUMMARY OF EVIDENCE**

The Executive Director of the Licensed Social Worker Program (Program), on designation by the Secretary of Health (Secretary), makes the allegations below, which are supported by evidence contained in case no. 2010-149685. The client referred to in this Statement of Allegations and Summary of Evidence is identified in the attached Confidential Schedule.

1. ALLEGED FACTS

1.1 On July 22, 2001, the state of Washington issued Respondent a credential to practice as a licensed social worker – independent clinical. Respondent's credential is currently active.

1.2 On or about August 2008, Client A was arrested and charged with criminal mistreatment of a child. On or about January 2009, Client A's criminal defense attorney referred Client A to Respondent for mental health treatment. Client A was diagnosed with post traumatic stress disorder and dissociative identity disorder. Respondent provided treatment to Client A to stabilize her mental condition during criminal proceedings.

1.3 On or about January 16, 2009 through November 6, 2009, Respondent provided mental health therapy treatment to Client A for a total of ninety-five (95) sessions.

1.4 Therapy sessions terminated on or about November 6, 2009, when Client A was convicted and sentenced to three and a half (3 ½) years at the Washington Correction Center for Women (WCCW) in Gig Harbor, Washington. Client A was released from prison on or about July 2011. After Client A's release from prison, she resumed treatment with Respondent.

1.5 On or about June 10, 2010, while incarcerated at WCCW, Client A signed a written authorization for Respondent to release her treatment records to the prison

psychologist. On or about August 30, 2010, Client A's prison psychologist contacted Respondent by phone to inquire about the release of treatment records. At such time, Respondent refused to release Client A's complete treatment records, stating that it was not in the best interest of Client A. Respondent offered instead to provide a brief summary and testing results. On or about October 2010, Respondent sent a written summary of treatment to the prison psychologist in charge of Client A's care.

2. SUMMARY OF EVIDENCE

- 2.1 Complaint Form with attachments. (3 pages)
- 2.2 Respondent's written statements with attachments. (24 pages)
- 2.3 Client A's treatment records, maintained by Respondent. (257 pages)
- 2.4 Email exchanges between Respondent and Client A. (640 pages)

3. ALLEGED VIOLATIONS

3.1 The facts alleged in Section 1, if proven, would constitute unprofessional conduct in violation of RCW 18.130.180(7); RCW 70.02.030(1), (3) and (8); and/or RCW 70.02.090, which provide in part:

RCW 18.130.180 Unprofessional conduct. The following conduct, acts, or conditions constitute unprofessional conduct for any license holder under the jurisdiction of this chapter:

...

(7) Violation of any state or federal statute or administrative rule regulating the profession in question, including any statute or rule defining or establishing standards of patient care or professional conduct or practice;

...

RCW 70.02.030 Patient authorization of disclosure.

(1) A patient may authorize a health care provider or health care facility to disclose the patient's health care information. A health care provider or health care facility shall honor an authorization and, if requested, provide a copy of the recorded health care information unless the health care provider or health care facility denies the patient access to health care information under RCW 70.02.090.

...

(3) To be valid, a disclosure authorization to a health care provider or health care facility shall:

(a) Be in writing, dated, and signed by the patient;

- (b) Identify the nature of the information to be disclosed;
- (c) Identify the name and institutional affiliation of the person or class of persons to whom the information is to be disclosed;
- (d) Identify the provider or class of providers who are to make the disclosure;
- (e) Identify the patient; and
- (f) Contain an expiration date or an expiration event that relates to the patient or the purpose of the use or disclosure.

...

(8) Where the patient is under the supervision of the department of corrections, an authorization signed pursuant to this section for health care information related to mental health or drug or alcohol treatment expires at the end of the term of supervision, unless the patient is part of a treatment program that requires the continued exchange of information until the end of the period of treatment.

RCW 70.02.090 Patient's request – Denial of examination and copying.

(1) Subject to any conflicting requirement in the public records act, chapter 42.56 RCW, a health care provider may deny access to health care information by a patient if the health care provider reasonably concludes that:

- (a) Knowledge of the health care information would be injurious to the health of the patient;
- (b) Knowledge of the health care information could reasonably be expected to lead to the patient's identification of an individual who provided the information in confidence and under circumstances in which confidentiality was appropriate;
- (c) Knowledge of the health care information could reasonably be expected to cause danger to the life or safety of any individual;
- (d) The health care information was compiled and is used solely for litigation, quality assurance, peer review, or administrative purposes; or
- (e) Access to the health care information is otherwise prohibited by law.

(2) If a health care provider denies a request for examination and copying under this section, the provider, to the extent possible, shall segregate health care information for which access has been denied under

subsection (1) of this section from information for which access cannot be denied and permit the patient to examine or copy the disclosable information.

(3) If a health care provider denies a patient's request for examination and copying, in whole or in part, under subsection (1)(a) or (c) of this section, the provider shall permit examination and copying of the record by another health care provider, selected by the patient, who is licensed, certified, registered, or otherwise authorized under the laws of this state to treat the patient for the same condition as the health care provider denying the request. The health care provider denying the request shall inform the patient of the patient's right to select another health care provider under this subsection. The patient shall be responsible for arranging for compensation of the other health care provider so selected.

4. NOTICE TO RESPONDENT

4.1 The Secretary has determined that this case may be appropriate for resolution through a Stipulation to Informal Disposition (Stipulation) pursuant to RCW 18.130.172(2). A proposed Stipulation is attached, which contains the disposition the Secretary believes is necessary to address the conduct alleged in this Statement of Allegations and Summary of Evidence.

4.2 If Respondent agrees that the disposition imposed by the Stipulation is appropriate, Respondent should sign and date the Stipulation and return it within fourteen (14) days to the Department of Health Office of Legal Services at PO Box 47873, Olympia, WA 98504-7873.

4.3 If Respondent does not agree that the terms and conditions contained in the Stipulation are appropriate, Respondent should contact Janet Staiger, Department of Health Staff Attorney, PO Box 47873, Olympia, WA 98504-7873, (360) 236-4743 within fourteen (14) days.

4.4 If Respondent does not respond within fourteen (14) days, the Secretary will assume Respondent has declined to resolve these allegations with an informal Stipulation and may proceed to formal disciplinary action against Respondent by filing a Statement of Charges pursuant to RCW 18.130.172(3).

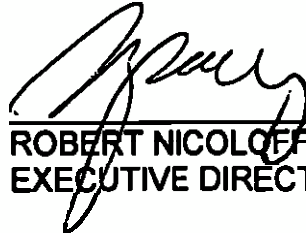
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4.5 If the parties cannot resolve the allegations with an informal Stipulation, the Secretary may proceed with a formal Statement of Charges.

DATED: July 10, 2012

STATE OF WASHINGTON
DEPARTMENT OF HEALTH
SECRETARY OF HEALTH



ROBERT NICOLOFF
EXECUTIVE DIRECTOR



JANET STAIGER, WSBA #16573
DEPARTMENT OF HEALTH STAFF ATTORNEY

Redaction Summary (5 redactions)

3 Privilege / Exemption reasons used:

- 1 -- "Attorney Work Product - RCW 42.56.290 - Drafts, notes, memoranda, statements, records or research reflecting the opinions or mental impressions of an attorney or attorney's agent that reveal factual or investigative information prepared, collected, or assembled in litigation or in anticipation of litigation." (2 instances)
- 2 -- "DOH Licensee Social Security Number - RCW 42.56.350(1)" (2 instances)
- 3 -- "National Practitioner Data Bank (NPDB) report received directly or indirectly from the NPDB -42 USC §1396r-2; 42 USC §1320a-7e; 45 CFR §60.20(a), RCW 42.56.070(1)" (1 instance)

Redacted pages:

- Page 2, Attorney Work Product - RCW 42.56.290 - Drafts, notes, memoranda, statements, records or research reflecting the opinions or mental impressions of an attorney or attorney's agent that reveal factual or investigative information prepared, collected, or assembled in litigation or in anticipation of litigation., 2 instances
- Page 19, DOH Licensee Social Security Number - RCW 42.56.350(1), 1 instance
- Page 19, National Practitioner Data Bank (NPDB) report received directly or indirectly from the NPDB -42 USC §1396r-2; 42 USC §1320a-7e; 45 CFR §60.20(a), RCW 42.56.070(1), 1 instance
- Page 20, DOH Licensee Social Security Number - RCW 42.56.350(1), 1 instance